

Please type a plus sign (+) inside this box → ☐

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. 7000-272

First Inventor Sylvain, Dany

Title CALL TRANSFER FOR AN INTEGRATED WIRELINE AND  
WIRELESS SERVICE

Express Mail Label No. EV086422391US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 29]  
(preferred arrangement set forth below)
  - Descriptive title of the Invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 11]
5. Oath or Declaration [Total Pages 2]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for a continuation/divisional with Box 18 completed)
  - i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76

## ADDRESS TO:

Mail Stop Patent Application  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATIONS PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☒ 37 C.F.R. §3.73(b) Statement ☒ Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☒ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other: \_\_\_\_\_

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No: \_\_\_\_\_ / \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_

Group / Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 17. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label

27820

or ☐ Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name

Address

City

State

Zip Code

Country

Telephone

Fax

Name (Print/Type)

Benjamin S. Withrow

Registration No. (Attorney/Agent)

40,876

Signature

Date

February 23, 2004

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

## Complete if Known

TOTAL AMOUNT OF PAYMENT (\$ ) 1580

Attorney Docket No. 7000-272

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																																																																																																																																																		
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:  Deposit Account Number: 50-1732  Deposit Account Name: Withrow & Terranova, PLLC <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td></td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td></td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td></td></tr> <tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td></td></tr> <tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td></td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td></td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td></td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td></td></tr> <tr><td>1453</td><td>1,330</td><td>2453</td><td>665</td><td></td></tr> <tr><td>1501</td><td>1,330</td><td>2501</td><td>665</td><td></td></tr> <tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td></td></tr> <tr><td>1503</td><td>640</td><td>2503</td><td>320</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>40</td></tr> <tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td></td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td></td></tr> <tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td></td></tr> </tbody> </table>		Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	1051	130	2051	65		1052	50	2052	25		1053	130	1053	130		1812	2,520	1812	2,520		1804	920*	1804	920*		1805	1,840*	1805	1,840*		1251	110	2251	55		1252	420	2252	210		1253	950	2253	475		1254	1,480	2254	740		1255	2,010	2255	1,005		1401	330	2401	165		1402	330	2402	165		1403	290	2403	145		1451	1,510	1451	1,510		1452	110	2452	55		1453	1,330	2453	665		1501	1,330	2501	665		1502	480	2502	240		1503	640	2503	320		1460	130	1460	130		1807	50	1807	50		1806	180	1806	180		8021	40	8021	40	40	1809	770	2809	385		1810	770	2810	385		1801	770	2801	385		1802	900	1802	900	
Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																																																																																
1051	130	2051	65																																																																																																																																																	
1052	50	2052	25																																																																																																																																																	
1053	130	1053	130																																																																																																																																																	
1812	2,520	1812	2,520																																																																																																																																																	
1804	920*	1804	920*																																																																																																																																																	
1805	1,840*	1805	1,840*																																																																																																																																																	
1251	110	2251	55																																																																																																																																																	
1252	420	2252	210																																																																																																																																																	
1253	950	2253	475																																																																																																																																																	
1254	1,480	2254	740																																																																																																																																																	
1255	2,010	2255	1,005																																																																																																																																																	
1401	330	2401	165																																																																																																																																																	
1402	330	2402	165																																																																																																																																																	
1403	290	2403	145																																																																																																																																																	
1451	1,510	1451	1,510																																																																																																																																																	
1452	110	2452	55																																																																																																																																																	
1453	1,330	2453	665																																																																																																																																																	
1501	1,330	2501	665																																																																																																																																																	
1502	480	2502	240																																																																																																																																																	
1503	640	2503	320																																																																																																																																																	
1460	130	1460	130																																																																																																																																																	
1807	50	1807	50																																																																																																																																																	
1806	180	1806	180																																																																																																																																																	
8021	40	8021	40	40																																																																																																																																																
1809	770	2809	385																																																																																																																																																	
1810	770	2810	385																																																																																																																																																	
1801	770	2801	385																																																																																																																																																	
1802	900	1802	900																																																																																																																																																	
2. <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other																																																																																																																																																				
<b>FEE CALCULATION</b> 1. BASIC FILING FEE <table border="1"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td>770</td></tr> <tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr><td colspan="5"><b>SUBTOTAL (1)</b></td><td><b>(\$ ) 770</b></td></tr> </tbody> </table>		Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	1001	770	2001	385	Utility filing fee	770	1002	340	2002	170	Design filing fee		1003	530	2003	265	Plant filing fee		1004	770	2004	385	Reissue filing fee		1005	160	2005	80	Provisional filing fee		<b>SUBTOTAL (1)</b>					<b>(\$ ) 770</b>																																																																																																									
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid																																																																																																																																															
1001	770	2001	385	Utility filing fee	770																																																																																																																																															
1002	340	2002	170	Design filing fee																																																																																																																																																
1003	530	2003	265	Plant filing fee																																																																																																																																																
1004	770	2004	385	Reissue filing fee																																																																																																																																																
1005	160	2005	80	Provisional filing fee																																																																																																																																																
<b>SUBTOTAL (1)</b>					<b>(\$ ) 770</b>																																																																																																																																															
2. EXTRA CLAIM FEES <table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>58</td> <td>-20** = 38</td> <td>X 18</td> <td>= 684</td> </tr> <tr> <td>Independent Claims: 4</td> <td>-3** = 1</td> <td>X 86</td> <td>= 86</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td>X</td> <td>= 0</td> </tr> </tbody> </table>		Total Claims	Extra Claims	Fee from below	Fee Paid	58	-20** = 38	X 18	= 684	Independent Claims: 4	-3** = 1	X 86	= 86	Multiple Dependent		X	= 0																																																																																																																																			
Total Claims	Extra Claims	Fee from below	Fee Paid																																																																																																																																																	
58	-20** = 38	X 18	= 684																																																																																																																																																	
Independent Claims: 4	-3** = 1	X 86	= 86																																																																																																																																																	
Multiple Dependent		X	= 0																																																																																																																																																	
<table border="1"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td></tr> <tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td></tr> <tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td></tr> <tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>** Reissue independent claims over original patent</td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td></tr> <tr><td colspan="5"><b>SUBTOTAL (2)</b></td></tr> </tbody> </table>		Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	1202	18	2202	9	Claims in excess of 20	1201	86	2201	43	Independent claims in excess of 3	1203	290	2203	145	Multiple dependent claim, if not paid	1204	86	2204	43	** Reissue independent claims over original patent	1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	<b>SUBTOTAL (2)</b>																																																																																																																				
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description																																																																																																																																																
1202	18	2202	9	Claims in excess of 20																																																																																																																																																
1201	86	2201	43	Independent claims in excess of 3																																																																																																																																																
1203	290	2203	145	Multiple dependent claim, if not paid																																																																																																																																																
1204	86	2204	43	** Reissue independent claims over original patent																																																																																																																																																
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent																																																																																																																																																
<b>SUBTOTAL (2)</b>																																																																																																																																																				
**or number previously paid, if greater; For Reissues, see above		*Reduced by Basic Filing Fee Paid <b>SUBTOTAL (3)</b> (\$ ) 40																																																																																																																																																		

## SUBMITTED BY

## Complete (if applicable)

Name (Print/Type)	Benjamin S. Withrow	Registration No. Attorney/Agent	40,876	Telephone	919-654-4520
Signature				Date	February 23, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

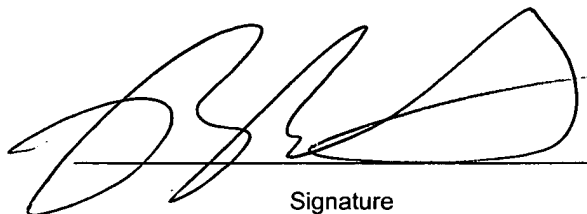
Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, USPTO, PO Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450.

<b>REQUEST AND CERTIFICATION UNDER 35 U.S.C. 122(b)(2)(B)(i)</b>	First Named Inventor    Sylvain, Dany	
	Title	CALL TRANSFER FOR AN INTEGRATED WIRELINE AND WIRELESS SERVICE
	Atty Docket Number	7000-272

I hereby certify that the invention disclosed in the attached application **has not and will not be** the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing. I hereby request that the attached application not be published under 35 U.S.C. 122(b).

February 23, 2004

Date



Signature

Benjamin S. Withrow, Reg. No. 40,876

Typed or printed name

This request must be signed in compliance with 37 CFR 1.33(b) and submitted with the application **upon filing**.

Applicant may rescind this nonpublication request at any time. If applicant rescinds a request that an application not be published under 35 U.S.C. 122(b), the application will be scheduled for publication at eighteen months from the earliest claimed filing date for which a benefit is claimed.

If applicant subsequently files an application directed to the invention disclosed in the attached application in another country, or under a multilateral international agreement, that requires publication of applications eighteen months after filing, the applicant **must** notify the United States Patent and Trademark Office of such filing within forty-five (45) days after the date of the filing of such foreign or international application. **Failure to do so will result in abandonment of this application (35 U.S.C. 122(b)(2)(B)(iii)).**

Burden Hour Statement: This collection of information is required by 37 CFR 1.213(a). The information is used by the public to request that an application not be published under 35 U.S.C. 122(b) (and the PTO to process that request). Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 6 minutes to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, USPTO, PO Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Mail Stop Patent Application  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

Sir:

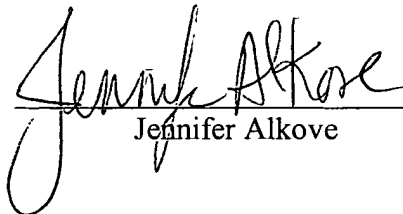
CERTIFICATE OF MAILING/EXPRESS MAIL

"Express Mail" Mailing Label Number EV086422391US

Date of Deposit February 23, 2004

I hereby certify that this paper, which is a Utility Patent Application entitled **CALL  
TRANSFER FOR AN INTEGRATED WIRELINE AND WIRELESS SERVICE** (our file  
7000-272), and the attached fee are being deposited with the United States Postal Service  
"Express Mail Post Office to Addressee" service under 37 C.F.R. 1.10 on the date indicated  
above and is addressed to the Commissioner for Patents, Mail Stop Patent Application, PO Box  
1450, Alexandria, VA 22313-1450.

Mailed By:

  
Jennifer Alkove

EV086422391US